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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *PMN*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

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IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 12/06/2001

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> NETHERLANDS	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 12	<b>INDEPENDENT CLAIMS</b> 6
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature	<i>PMN</i> Initials			

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## TITLE

Method and device communicating a command

<b>FILING FEE RECEIVED</b> 1122	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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